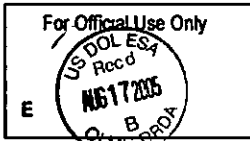


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U S C 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 6994	2 Fiscal Year Covered From 1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing Name Dennis Becker P O Box Bldg Room No if any STE 120 Street 15208 - 52nd Avenue South City Seattle State Washington ZIP Code + 4 98188	4 Name, file number, and address of labor organization Name BAC Local #1 of Washington Labor Organization File Number 540-169 P O Box Building and Room Number if any STE 120 Street 15208 - 52nd Avenue South City Seattle State Washington ZIP Code + 4 98188
5 Position in labor organization President	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	7 a Nature of Interest Transaction or Income 7 b Amount

Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete. (See the section on penalties in the instructions)	
Signed	On 8-11-05 206-248-2456 Date Telephone Number

Name of Person Filing Dennis Becker	File Number U
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any) Name Northwest Bricklayers Pension Trust Trade Name if any _____ P O Box Bldg Room No if any _____ Street 9848 E Burnside City Portland State Oregon ZIP Code + 4 97216 2330	9 Business deals with <input checked="" type="checkbox"/> a Labor Organization <input type="checkbox"/> b Trust <input type="checkbox"/> c Employer
10 If 9 b or 9 c is checked give trust or employer's name Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	11 a Nature of such dealing Taft-Hartley Trust Fund received contributions under Collective Bargaining Agreement with affiliated Union and provides benefits 11 b Approximate dollar value of such dealing \$4 660 151 12 a Nature of interest held or income received Trustee Meeting Expenses (Some expenses are first paid by TPA and billed to Trust Fund - TPA is Masonry Industry Trust Administration Inc) 12 b Amount \$306

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any) Name _____ Trade Name if any _____ P O Box Bldg Room No if any _____ Street _____ City _____ State _____ ZIP Code + 4 _____	14 a Nature of payment
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment